TY NAME: BASF Corp.					
TY ID (PREMISE NUMBER):	02-47-04-0195	This report includes permits to install	# P0116505, P0117027, P111903 and P011		
TY ADDRESS: 120 Pine Stre	eet, Elyria, OH 44035				
e or most recent modification	n date: 07/27/01				
ERLY Reporting Period			SEMIANNUAL Reporting Period (please indicate AN/A@ below in the AFrom@ and fields if this report does include semiannual deviation reporting)		
NA	To: NA	From: 07/01/15	To: 12/31/15		
ages in <u>report,</u> including this one: 11 pages					
list any supporting attachments					
ng deadline: 01/31/2016					

NOTE: The deviation reporting period shall be stated in the following format: Axx/xx/xx through zz/zz/zz@ where xx/xx/xx and zz/zz/zz are the beginning and end dates for the deviation reporting period respectively.

SIGNATURE FOR STATEMENT

This statement shall be signed by the responsible official as defined in OAC rule 3745-77-01(GG). Making of any false material statement, representation or certification constitutes

a violation of ORC 3704.05(H), and subjects the responsible party signing this statement to civil and/or criminal penalties as provided in ORC 3704.06(C) and ORC 3704.

CERTIFICATION

Based on information and belief formed after reasonable inquiry, I hereby affirm, as stated in OAC rule 3745-77-03(D), that the statements and information as transmitted in this

Title V report are true, accurate and complete to the best of my knowledge.

Title	-
This report includes permits to install # P0	116506, P0117027, P111903 and P0115631
. • • • • • • • • • • • • • • • • • • •	dicate "N/A" below in the "From" and "To" fields if the eporting)
From: 07/01/16	To: 12/31/16
	ı
	SEMIANNUAL Reporting Period (please in report does include semiannual deviation r

Ohio Environmental Protection Agency **Deviation Reporting**

FACILITY NAME			
FACILITY ID (PREMISE NUME	BER)		
FACILITY ADDRESS			
Issuance or most recent modifi	ication date		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Period (please in this report does include semiannual deviated)	
From: To:		From:	То:
Reporting deadline			

SECTION I -

$\overline{704.05}$ (H), PART I General Terms and Conditions (Permit Requirement Reporting) (Table1) Mark the following box with an >X= if no General Terms and Conditions deviations occurred

THERE WERE NO DEVIATIONS OF ANY OF THE TERMS AND CONDITIONS OF PART I OF THE TITLE V PERMIT DURING THE REPORTING PERIOD

Add rows as necessary to the following table for reported deviations (one for each General Term as applicable; see detailed instructions for more information) (Table2)

PERMIT RM scription	Reporting Requirement (choose one)		ACTUAL METHOD USED TO DETERMINE COMPLIANCE	DEVIATION INFORMATION			PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTION PREVENTATIVE MEASUR
	Quarterly Semi- Annual			DEVIATION DURATION		DESCRIPTION AND MAGNITUDE OF THE DEVIATION		
				DATE / TIME START	DATE / TIME END			

TVDEVIATIONV1.DOC 11/2005

Ohio Environmental Protection Agency Deviation Reporting

FACILITY NAME			
FACILITY ID (PREMISE NUME	BER)		
FACILITY ADDRESS			
Issuance or most recent modifi	cation date		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Period (please in this report does include semiannual deviated)	
From: To:		From:	То:
Reporting deadline			

PERMIT RM scription		ACTUAL METHOD USED TO Ing Requirement DETERMINE COMPLIANCE INFORMATION Choose one)			PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTION PREVENTATIVE MEASURE		
·	Quarterly Semi- Annual		DEVIATION DURATION		DESCRIPTION AND MAGNITUDE OF THE DEVIATION			
				DATE / TIME START	DATE / TIME END			

Ohio Environmental Protection Agency Section II- Page 1

Doviction	Reporting
Deviation	Reporting

FACILITY NAME: BASF Corp	٥.		
FACILITY ID (PREMISE NUM	IBER): 02-47-04-0195	This report includes permits to	install # P0116506, P0117027, P111903 a
FACILITY ADDRESS: 120 Pi	ne Street, Elyria, OH 44035		
Issuance or most recent modi	fication date: 07/27/01		
QUARTERLY Reporting Period	QUARTERLY Reporting Period		od (please indicate AN/A@ below in the AFre semiannual deviation reporting)
From: NA To: NA		From: 07/01/15	To: 12/31/15
Reporting deadline: 01/31/2016			

<u>Section II - Part II Facility-wide Permit Requirement Reporting</u> Insignificant Emissions Unit Negative Declarations (Table1)

List each insignificant emissions unit where no deviations of any PTI terms or applicable requirements for the listed emissions unit occurred, or add rows as necessary to the deviation reporting table (see next page) for reported deviations (one for each term as applicable; see detailed instructions for more information)

VERE NO DEVIATIONS OF <u>ANY</u> PTI TERMS OR APPLICABLE REQUIREMENTS FOR THE FOLLOWING LISTED INSIGNIFICANT EMISSIONS UNITS IDENTIFIED IN PART II.*I* LE V PERMIT:

color tray dying (E-5)

trays dryers, littleford mixer (E-31)

HC-11 tanks (E-53)

general catalyst dryers #4, #5 (E-86)

nitric acid dilution (E-87)

ZR sinter furnace (E-89)

Deviation reporting			
FACILITY NAME: BASE C	orp.		
FACILITY ID (PREMISE NU	JMBER): 02-47-04-0195	This report includes permits	to install # P0116506, P0117027, P111903 a
FACILITY ADDRESS: 120	Pine Street, Elyria, OH 44035		
Issuance or most recent mo	dification date: 07/27/01		
QUARTERLY Reporting Pe	QUARTERLY Reporting Period		riod (please indicate AN/A@ below in the AFride semiannual deviation reporting)
From: NA To: NA		From: 07/01/15	To: 12/31/15
Reporting deadline: 01/31/2016			·

VERE NO DEVIATIONS OF ANY PTI TERMS OR APPLICABLE REQUIREMENTS FOR THE FOLLOWING LISTED INSIGNIFICANT EMISSIONS UNITS IDENTIFIED IN PART II. I LE V PERMIT:

ammonia stripper in WWTP (E-93)

12 inch rotary calciner (E-95)

reduction towers (E-98)

#6 rotary calciner (E-97)

Horne tableting machines (E-102)

sulfuric acid storage tank

Kewanee boiler, rated at 8.6 MMBtu/hr

Kewanee boiler, rated at 8.6 MMBtu/hr

Kewanee boiler, rated at 8.6 MMBtu/hr

2-47-04-0195	This report includes permits to install # P0	116506, P0117027, P111903 a
t, Elyria, OH 44035		
date: 07/27/01		
QUARTERLY Reporting Period		
From: NA To: NA		To: 12/31/15
Reporting deadline: 01/31/2016		
:	02-47-04-0195 et, Elyria, OH 44035 date: 07/27/01	st, Elyria, OH 44035 date: 07/27/01 SEMIANNUAL Reporting Period (please in fields if this report does include semiannual)

VERE NO DEVIATIONS OF ANY PTI TERMS OR APPLICABLE REQUIREMENTS FOR THE FOLLOWING LISTED INSIGNIFICANT EMISSIONS UNITS IDENTIFIED IN PART II. J LE V PERMIT:

Kewanee boiler, rated at 8.6 MMBtu/hr

Building 27 Spin Flash Dryer

Ohio Environmental Protection Agency Section II- Page 2

Deviation Reporting

FACILITY NAME: BASE Co	rp.		
FACILITY ID (PREMISE NUI	MBER): 02-47-04-0195	This report includes permits to	install # P0116506, P0117027, P111903 a
FACILITY ADDRESS: 120 F	Pine Street, Elyria, OH 44035		
Issuance or most recent mod	dification date: 07/27/01		
QUARTERLY Reporting Period			
QUARTERLY Reporting Per	riod	· · · · · · · · · · · · · · · · · · ·	od (please indicate AN/A@ below in the AFre semiannual deviation reporting)
QUARTERLY Reporting Per From: NA	riod To: NA	· · · · · · · · · · · · · · · · · · ·	``

<u>Facility-wide Permit Requirements Terms and Conditions (Permit Requirement Reporting) - Negative Declarations (mark with an >X= if applicable)</u> (Table 2)

THERE WERE NO DEVIATIONS OF ANY OF THE TERMS AND CONDITIONS OF PART II OF THE TITLE V PERMIT DURING THE REPORTING PERIOD SPECIFIED IN THIS REPORT

Section II - Part II Facility-wide and/or IEU permit requirement (Permit Requirement Reporting) - Deviation Reporting (Table 3)

Add rows as necessary to the following table for reported deviations (one for each Term as applicable; see detailed instructions for more information)

r IEU T iption	Reporting Requirement (choose one) tion or both		choose one) DETERMINE		DEVIATION INFORMATION		PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MALFUN WRIT REPOF DATE
s for		Semi- Annual			IATION ATION	DESCRIPTION AND MAGNITUDE OF THE			? (Yes or No - If state ANO REPORT	(If no reports were made, state ANO REPORTS@ in the space below)	
				DATE / TIME START	DATE / TIME END	DEVIATION			the flext column)		

FACILITY NAME: BASF Cor	p.		
FACILITY ID (PREMISE NUM	MBER): 02-47-04-0195	This report includes permits to	o install # P0116506, P0117027, P111903 a
FACILITY ADDRESS: 120 P	ine Street, Elyria, OH 44035		
Issuance or most recent mod	Issuance or most recent modification date: 07/27/01		
QUARTERLY Reporting Peri	QUARTERLY Reporting Period		riod (please indicate AN/A@ below in the AFr
From: NA To: NA		From: 01/01/14	To: 06/30/14
Reporting deadline: 07/01/14			

r IEU T iption	Reporting R (choos or b	/	USED TO INFORMATION CAUSE FOR THE ACTIONS / DETERMINE DEVIATION PREVENTATIV		E ACTIONS / DEVIAT PREVENTATIVE ATTRIBU MEASURES TAKEN TO A		OR THE ACTIONS / DEVIATION VERBAL REPORT(S) MEASURES TAKEN TO A DATE(S)		VERBAL REPORT(S) DATE(S)	MALFUN WRIT REPOF DATE	
s for	Quarterly	Semi- Annual			ATION ATION	DESCRIPTION AND MAGNITUDE OF THE			? (Yes or No - If state ANO REP Yes, continue to the space b	If state ANO REPORTS@ in to the space below)	(If no reports state ANO R in the spac
				DATE / TIME START	DATE / TIME END	DEVIATION			the next column)		

Ohio Environmental Protection Agency Section III- Page 1

Deviation Reporting

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBER): 0)2-47-04-0195	This report includes permits to install # P01	16506, P0117027, P111903 a
FACILITY ADDRESS: 120 Pine Street, Elyria, OH 44035			
Issuance or most recent modification of	date: 07/27/01		
QUARTERLY Reporting Period			
QUARTERLY Reporting Period		SEMIANNUAL Reporting Period (please includes if this report does include semiannual	
QUARTERLY Reporting Period From: NA	To: NA		

Section III - Part III Emissions Unit Terms and Conditions (Permit Requirement Reporting) - Negative Declarations (Table 1)

List each emissions unit where no deviations of any terms for the listed emissions unit occurred, or add rows as necessary to the second table (see next page) for reported deviations (one for each term as applicable; see detailed instructions for more information)

VERE NO DEVIATIONS OF ANY OF THE TERMS AND CONDITIONS OF PART III OF THE TITLE V PERMIT FOR THE FOLLOWING LISTED EMISSIONS UNITS:

Emissions Unit ID	Please place an >X= below if there were no Quarterly Deviations - If an >X= is not indicated, the deviation(s) must be identified in Table2 below	If applicable, please place an >X= below if there no Semiannual Deviations - If an >X= is not indithe deviation(s) must be identified in Table2 b
	X	X
	Х	X
	X	X

FACILITY NAME: BASF Corp).		
FACILITY ID (PREMISE NUM	BER): 02-47-04-0195	This report includes permits to	o install # P0116506, P0117027, P111903 a
FACILITY ADDRESS: 120 Pine Street, Elyria, OH 44035			
Issuance or most recent modification date: 07/27/01			
QUARTERLY Reporting Period			iod (please indicate AN/A@ below in the AFrode semiannual deviation reporting)
From: NA To: NA		From: 07/01/15	To: 12/31/15
Reporting deadline: 01/31/2016			•

X	X
X	X
X	X
X	Х
X	Х
X	Х
X	Х

FACILITY NAME: BASE C	orp.		
FACILITY ID (PREMISE NUMBER): 02-47-04-0195		This report includes permits to	o install # P0116506, P0117027, P111903 a
FACILITY ADDRESS: 120 Pine Street, Elyria, OH 44035			
Issuance or most recent modification date: 07/27/01			
QUARTERLY Reporting Period			od (please indicate AN/A@ below in the AFro
From: NA	To: NA	From: 07/01/15	To: 12/31/15
Reporting deadline: 01/31/2	2016		

X	X
X	X
X	Х
X	Х
	Х
X	Х
X	Х
	Х
X	Х

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBER): 02-47-04-0195		This report includes permits to i	install # P0116506, P0117027, P111903 a
FACILITY ADDRESS: 120 Pine Street, Elyria, OH 44035			
Issuance or most recent modification date: 07/27/01			
QUARTERLY Reporting Period		· •	d (please indicate AN/A@ below in the AFrosemiannual deviation reporting)
From: NA	To: NA	From: 07/01/15	To: 12/31/15
Reporting deadline: 01/31/2016			

X	
X	X
X	X
X	X
X	X
X	X
X	
X	
X	X

Х

Х

FACILITY NAME: BASF	Corp.			
FACILITY ID (PREMISE NUMBER): 02-47-04-0195		This report includes permits to install # P0116506, P0117027, P11190		
FACILITY ADDRESS: 12	20 Pine Street, Elyria, OH 44035			
Issuance or most recent r	modification date: 07/27/01			
QUARTERLY Reporting	Period		porting Period (please ir does include semiannua	ndicate AN/A@ below in the AFral deviation reporting)
From: NA	To: NA	From: 07/01/15		To: 12/31/15
Reporting deadline: 01/3	1/2016			
	X		Х	
	X		Х	
	X			

Χ

Ohio Environmental Protection Agency Section III- Page 2

Deviation Reporting

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBE	ER): 02-47-04-0195	This report includes permits to	o install # P0116506, P0117027, P111903 a
FACILITY ADDRESS: 120 Pine Street, Elyria, OH 44035			
Issuance or most recent modification date: 07/27/01			
QUARTERLY Reporting Period		SEMIANNUAL Reporting Peri	iod
From: NA To: NA		From: 01/01/14	To: 06/30/14
Reporting deadline: 07/31/2014			·

<u>Section III - Part III Emissions Unit Terms and Conditions (Permit Requirement Reporting) - Deviation Reporting</u> (Table2)

Add rows as necessary to the following table for reported deviations (one for each Term as applicable; see detailed instructions for more information) - Please group deviations for each emissions unit that has deviations of multiple terms.

NS J) otion W)	TITLE V PERMIT TERM NO & Description	(choos	Requirement se one) poth	ACTUAL METHOD USED TO DETERMINE COMPLIANCE	DEVIATION INFORMATION			PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A MALFUNCTION?	MALFUNCTION VERBAL REPORT(S) DATE(S) (If no reports were	MALI W RE. D (If r
		Quarterly	Semi- Annual		DEVIA DURA	ATION ATION	DESCRIPTION AND MAGNITUDE			(Yes or No - If Yes, continue to the next column)	made, state ANO REPORTS@ in the space below)	we sta
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			the next columny	space below)	the s
sor	3(d)(4) - Collect and record the Pressure Drop across the bin vent, once each day.		×	Records of pressure drop	7/13/15	7/27/15	A total of 14 daily records is missing.	Incorrect recording form	Form corrected	no	no	
sor	3(d)(4) - Collect and record the Pressure Drop across the bin vent, once each day.		×	Records of pressure drop	7/30/15	8/10/15	A total of 10 daily records is missing.	Incorrect recording form	Form corrected	no	no	

FACILITY NAME: BASE	Corp.		
FACILITY ID (PREMISE N	NUMBER): 02-47-04-0195	This report includes permits to	install # P0116506, P0117027, P111903 a
FACILITY ADDRESS: 12	0 Pine Street, Elyria, OH 44035		
Issuance or most recent n	nodification date: 07/27/01		
QUARTERLY Reporting F	Period	SEMIANNUAL Reporting Perio	od
From: NA	To: NA	From: 01/01/14	To: 06/30/14
Reporting deadline: 07/31	/2014		

NS J) otion w)	TITLE V PERMIT TERM NO & Description	(choos	Requirement se one) both	ACTUAL METHOD USED TO DETERMINE COMPLIANCE		DEVIATION INFORMATIO		PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A MALFUNCTION?	MALFUNCTION VERBAL REPORT(S) DATE(S)	MALI W RE. D
		Quarterly	Semi- Annual		DEVIA DURA	ATION ATION	DESCRIPTION AND MAGNITUDE			(Yes or No - If Yes, continue to the next column)	(If no reports were made, state ANO REPORTS@ in the space below)	(If r we sta REF
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			the next columny	Space below)	the s
sor)	3(d)(4) - Collect and record the Pressure Drop across the bin vent, once each day.		x	Records of pressure drop	8/14/15	9/23/15	A total of 40 daily records is missing.	Incorrect recording form	Form corrected	no	no	
sor	3(d)(4) - Collect and record the Pressure Drop across the bin vent, once each day.		×	Records of pressure drop	9/27/15	9/29/15	A total of 40 daily records is missing.	Incorrect recording form	Form corrected	no	no	
nt)	Visible emissions from capture systems		х	Daily visual inspections	07/20/15 0300	07/20/15 0320	Visible emissions	K-Tron filling	Release vacuumed up, procedure revised	no	no	

To: NA	From: 01/01/14	To: 06/30/14
	OLIMIA ITTO AL TROPOTATION OTR	ou .
·	SEMIANNUAL Reporting Perio	od
n date: 07/27/01		
reet, Elyria, OH 44035		
: 02-47-04-0195	This report includes permits to	install # P0116506, P0117027, P111903 a
	reet, Elyria, OH 44035	reet, Elyria, OH 44035 n date: 07/27/01

NS J) otion w)	TITLE V PERMIT TERM NO & Description	(choos	Requirement se one) poth	ACTUAL METHOD USED TO DETERMINE COMPLIANCE		DEVIATION INFORMATION		PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A MALFUNCTION?	MALFUNCTION VERBAL REPORT(S) DATE(S)	MALI W RE D
		Quarterly	Semi- Annual		DEVIA DURA		DESCRIPTION AND MAGNITUDE			(Yes or No - If Yes, continue to the next column)	(If no reports were made, state ANO REPORTS@ in the space below)	(If r we sta REP
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			the next columny	space below)	the s
nt)	Visible emissions from capture systems		×	Daily visual inspections	07/22/15 1350	07/22/15 1410	Visible emissions	Valve failure	Release vacuumed up valve replaced	no	no	
nt)	Visible emissions from capture systems		х	Daily visual inspections	07/27/15 0030	07/27/15 0230	Visible emissions	Valve left open	Release vacuumed up valve closed	no	no	
nt)	Visible emissions from capture systems		х	Daily visual inspections	07/27/15 0900	07/27/15 0230	Visible emissions	K-Tron Leak	Release vacuumed up seal replaced	no	no	

FACILITY NAME: BASE	Corp.		
FACILITY ID (PREMISE N	NUMBER): 02-47-04-0195	This report includes permits to	install # P0116506, P0117027, P111903 a
FACILITY ADDRESS: 12	0 Pine Street, Elyria, OH 44035		
Issuance or most recent n	nodification date: 07/27/01		
QUARTERLY Reporting F	Period	SEMIANNUAL Reporting Perio	od
From: NA	To: NA	From: 01/01/14	To: 06/30/14
Reporting deadline: 07/31	/2014		

NS J) otion W)	TITLE V PERMIT TERM NO & Description	(choos	Requirement se one) ooth	ACTUAL METHOD USED TO DETERMINE COMPLIANCE		INFORMATION		PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A MALFUNCTION?	MALFUNCTION VERBAL REPORT(S) DATE(S)	MALI W RE D
		Quarterly	Semi- Annual		DEVIA DURA		DESCRIPTION AND MAGNITUDE			(Yes or No - If Yes, continue to the next column)	(If no reports were made, state ANO REPORTS@ in the space below)	(If r we sta REF
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			une next columny	space below)	the sp
nt)	Visible emissions from capture systems		х	Daily visual inspections	08/14/15 0530	08/14/15 0550	Visible emissions	Loose bolt	Release vacuumed up bolt tightened	no	no	
nt)	Visible emissions from capture systems		х	Daily visual inspections	10/11/15 0400	10/11/15 1000	Visible emissions	Loose flange bolt	Release vacuumed up bolt tightened	no	no	
nt)	Visible emissions from capture systems		х	Daily visual inspections	11/12/15 0400	11/16/15 1200	Visible emissions	Valve shaft seal failure	Release vacuumed up seal replaced	no	no	

Reporting deadline: 07/31/20)14		
From: NA	To: NA	From: 01/01/14	To: 06/30/14
QUARTERLY Reporting Peri	iod	SEMIANNUAL Reporting Period	od
Issuance or most recent mod	ification date: 07/27/01		
FACILITY ADDRESS: 120 P	rine Street, Elyria, OH 44035		
FACILITY ID (PREMISE NUM	MBER): 02-47-04-0195	This report includes permits to	install # P0116506, P0117027, P111903 a
FACILITY NAME: BASF Cor	p.		

NS J) otion w)	TITLE V PERMIT TERM NO & Description	(choos	Requirement se one) poth	ACTUAL METHOD USED TO DETERMINE COMPLIANCE		DEVIATION INFORMATIO		PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A MALFUNCTION?	MALFUNCTION VERBAL REPORT(S) DATE(S)	MALI W RE. D
		Quarterly	Semi- Annual		DEVIA DURA		DESCRIPTION AND MAGNITUDE			(Yes or No - If Yes, continue to the next column)	(If no reports were made, state ANO REPORTS@ in the space below)	(If r we sta REF
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			une next columny	space below)	the s
y #4)	Visible emissions		×	Visual observation	08/29/15 1925	08/29/15 2005	Visible emissions	Low sodium sulfide in scrubber	Sodium sulfide added	yes	yes	09
y #4)	Visible emissions		×	Visual observation	10/08/15 1900	10/08/15 1905	Visible emissions	Low sodium sulfide in scrubber	Sodium sulfide added	yes	yes	10
y #1)	Visible emissions		×	Visual observation	10/08/15 1900	10/08/15 1905	Visible emissions	Low sodium sulfide in scrubber	Sodium sulfide added	yes	yes	10

EACH ITY NAME: DACE Core			
FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMB	ER): 02-47-04-0195	This report includes permits to	install # P0116506, P0117027, P111903 a
FACILITY ADDRESS: 120 Pine	e Street, Elyria, OH 44035		
Issuance or most recent modifie	cation date: 07/27/01		
QUARTERLY Reporting Period	1	SEMIANNUAL Reporting Perio	od
From: NA	To: NA	From: 01/01/14	To: 06/30/14
Reporting deadline: 07/31/2014	1		·

NS J) otion w)	TITLE V PERMIT TERM NO & Description	(choos	Requirement se one) poth	ACTUAL METHOD USED TO DETERMINE COMPLIANCE		DEVIATION INFORMATIO		PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MALI W RE. D
		Quarterly	Semi- Annual		DEVIA DURA		DESCRIPTION AND MAGNITUDE			MALFUNCTION? (Yes or No - If Yes, continue to the next column)	(If no reports were made, state ANO REPORTS@ in the space below)	(If r we sta REF
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			the next columny	space below)	the s
y #1)	Visible emissions		×	Visual observation	11/26/15 0815	11/26/15 0820	Visible emissions	Low sodium sulfide in scrubber	Sodium sulfide added	yes	yes	12
: :r)	Visible emissions		×	Visual observation	11/16/15 0630	11/16/15 0635	Visible emissions	Low sodium sulfide in scrubber	Sodium sulfide added	yes	yes	12
er #2)	Visible emissions		×	Visual observation	10/31/15 1500	10/31/15 1630	Visible emissions	Wrong material being processed	Calciner stopped material removed	no	no	

Reporting deadline: 07/31/20)14		
From: NA	To: NA	From: 01/01/14	To: 06/30/14
QUARTERLY Reporting Peri	iod	SEMIANNUAL Reporting Period	od
Issuance or most recent mod	ification date: 07/27/01		
FACILITY ADDRESS: 120 P	rine Street, Elyria, OH 44035		
FACILITY ID (PREMISE NUM	MBER): 02-47-04-0195	This report includes permits to	install # P0116506, P0117027, P111903 a
FACILITY NAME: BASF Cor	p.		

NS J) otion w)	TITLE V PERMIT TERM NO & Description	Reporting Requirement (choose one) or both		ACTUAL METHOD USED TO DETERMINE COMPLIANCE	DEVIATION INFORMATION			PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MALI W RE
,		Quarterly	Semi- Annual		DEVIATION DURATION		DESCRIPTION AND			MALFUNCTION? (Yes or No - If Yes, continue to	(If no reports were made, state ANO REPORTS@ in the	(If r we sta
					DATE/TIME START	DATE/TIM E END	MAGNITUDE OF THE DEVIATION			the next column)	space below)	REP the s _t
er #2)	Visible emissions		×	Visual observation	11/28/15 1300	11/28/15 1302	Visible emissions	Operations issue	Calciner stopped	no	no	
y #2)	Visible emissions		х		12/3/15 0740	12/3/15 0755	Visible emissions	Low sodium sulfide in scrubber	Sodium sulfide added	yes	yes	12
y #3)	Visible emissions		х		12/1/15 1330	12/1/15 1345	Visible emissions	Low ammonia in SCR	Ammonia added	no	no	

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Deviation Reporting

FACILITY NAME: BASF Corp.						
FACILITY ID (PREMISE NUMBER): 02	2-47-04-0195	This report includes permits to install # P0116506, P0117027, P111903 a				
FACILITY ADDRESS: 120 Pine Street	, Elyria, OH 44035					
Issuance or most recent modification d	ate: 07/27/01					
QUARTERLY Reporting Period		SEMIANNUAL Reporting Period				
From: NA	To: NA	From: 01/01/14	To: 06/30/14			
Reporting deadline: 07/31/2014						

NS J) otion ※)	TITLE V PERMIT TERM NO & Description	Reporting Requirement (choose one) or both		ACTUAL METHOD USED TO DETERMINE COMPLIANCE	DEVIATION INFORMATION			CAUSE FOR ACTION THE PREVENTA	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MALI W RE. D
		Quarterly	Semi- Annual		DEVIATION DURATION		DESCRIPTION AND MAGNITUDE			MALFUNCTION? (Yes or No - If Yes, continue to the next column)	(If no reports were made, state ANO REPORTS@ in the space below)	we
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			the next columny	space below)	the s
yer	Visible emissions		×		10/7/15 0645	10/7/15 0715	Visible emissions	Excess temp	Lowered temp in dryer	no	no	

See page 3 of the instructions ASECTION III ADDITIONAL DETAILED INSTRUCTIONS FOR COMPLETING A DEVIATION REPORTING TABLE of for guidance on this table.